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CONFIRMATION NO. 3080

<b>SERIAL NUMBER</b> 10/569,959	<b>FILING OR 371(c) DATE</b> 02/28/2006 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1652	<b>ATTORNEY DOCKET NO.</b> MUKAI 3	
<b>APPLICANTS</b> Kazuhisa Mukai, Okayama, JAPAN; Hikaru Watanabe, Okayama, JAPAN; Tomoyuki Nishimoto, Okayama, JAPAN; Michio Kubota, Okayama, JAPAN; Shigeharu Fukuda, Okayama, JAPAN; Toshio Miyake, Okayama, JAPAN; } GR					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP04/12282 08/26/2004					
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2003-304964 08/28/2003 JAPAN 2004-174880 06/14/2004 } GR					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/08/2006</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> <i>GR</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 1444					
<b>TITLE</b> Cyclic maltosylmatose					
<b>FILING FEE RECEIVED</b> 1800	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		